

<p>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</p> <p><input type="checkbox"/> Declaration Submitted with Initial Filing</p> <p>OR</p> <p><input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)</p>	<i>First Named Inventor</i>	WILSON et al.
	<i>COMPLETE IF KNOWN</i>	
	<i>Application Number</i>	09/553,810
	<i>Filing Date</i>	04/21/00
	<i>Group Art Unit</i>	Unknown
	<i>Examiner Name</i>	Unknown

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPEECH RECOGNITION METHOD

the specification of which

☐ is attached hereto

OR

☒ was filed on **April 21, 2000** as United States Application Number **09/553,810** or PCT International.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (mm/dd/yyyy)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (mm/dd/yyyy)

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

As a named inventor, I hereby appoint
and all other registered attorneys listed under
as my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office
connected therewith.

**Anthony H. Handal, Registration No. 26,275,
Customer No. 00545**

Address all telephone calls to Anthony H. Handal at (203) 838-8589

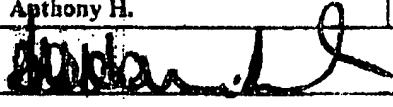
Address all correspondence to:

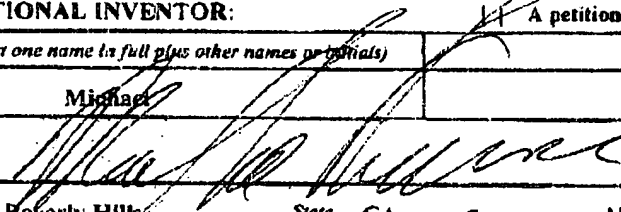
Anthony H. Handal
Handal & Morofsky
80 Washington Street
Norwalk, Connecticut 06854
Facsimile (203) 838-8794

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF ADDITIONAL INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Names (at least one name in full plus other names or initials)			Family Name or Surname		
H. Donald			WILSON		
Inventor's Signature: <i>H. Donald Wilson</i>			Date: 9/14/00		
Residence: City	White Plains	State	NY	Country	U.S.A
Post Office Address:	115 Havilands Lane		Citizenship	U.S.A	
Post Office Address:					
City	White Plains	State	NY	Zip	10605
				Country	U.S.A

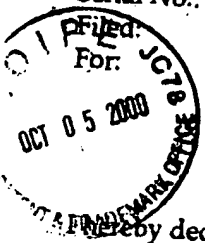
☒ Additional inventors are being named on the separate sheet attached hereto.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<i>Given Names (at least one name in full plus other names or initials)</i>		<i>Family Name or Surname</i>	
Anthony H.		HANDAL	
<i>Inventor's Signature:</i> 		<i>Date:</i> 9/27/00	
<i>Residence: City</i>	Westport	<i>State</i>	CT
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<i>Post Office Address:</i> 3 Bluechip Lane			
<i>Post Office Address:</i>			
<i>City</i>	Westport	<i>State</i>	CT
<i>Zip</i>	06880	<i>Country</i>	U.S.A.

NAME OF ADDITIONAL INVENTOR:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
<i>Given Names (at least one name in full plus other names or initials)</i>		<i>Family Name or Surname</i>	
Michael		LESSAC	
<i>Inventor's Signature:</i> 		<i>Date:</i> 9/27/00	
<i>Residence: City</i>	Beverly Hills	<i>State</i>	CA
<i>Country</i>	U.S.A.	<i>Citizenship</i>	U.S.A.
<i>Post Office Address:</i> 1757 Franklin Canyon Road			
<i>Post Office Address:</i>			
<i>City</i>	Beverly Hills	<i>State</i>	CA
<i>Zip</i>	90210	<i>Country</i>	U.S.A.



Serial No.: 09/553.810
 Filed: April 21, 2000
 For: "SPEECH RECOGNITION METHOD"



Handwritten initials

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(b))-SMALL BUSINESS CONCERN

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
☒ an official for the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN LESSAC SYSTEMS, INC.
 ADDRESS OF CONCERN P.O. Box 1525, 6 Thorton Lane, concord, MA 01742

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18 and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled "SPEECH RECOGNITION METHOD" by inventors H. Donald Wilson, Anthony H. HANDAL, and Michael LESSAC described in

- ☐ the specification filed herewith
☒ application Serial No. 09/553.810, filed April 21, 2000.
☐ patent No. _____, issued _____.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). *NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME _____ ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME _____ ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING H. Donald Wilson
 ADDRESS OF PERSON SIGNING 115 HAVILANDS LA. WHITE PLAINS NY 10605
 SIGNATURE H. Donald Wilson DATE 9/14/00 TITLE OF PERSON OTHER THAN OWNER CHAIRMAN